Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>05/25/07</u>	Address:	1112 8 th Street
Case #:	43F-24961		Columbus, IN
County:	<u>Bartholomew</u>		
Type of La	nboratory Scizure (check one)	Seizure Location (check all that apply)
	onal Lab al/Glassware/Equipment (only) te (only)	✓ Residence✓ Outbuilding✓ Vehicle	☐ Hotel/Motel ☐ Open — No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: 7 gallons, Outbuilding			
Water Reactive Metal (Lithium): Strippings, Outbuilding			
Anhydrous Ammonia: 30 Gallons, Outbuilding			
Corrosive Acid: 1.5 gallons			
Corrosive Base:			
Other (item and location):			
☐ Yes _(☑ No	er age 18 discovered (check one) number present) port to Child Protective Services	☐ Ephedrin ☐ Retail/M	e Information e/Pseudoephedrine Tracking Log erchant Tip spicious Vehicle, Wante
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: Columbus	Fax: 812-376-2679	
Health Department: Bartholomew		Fax: <u>(812)</u> Fax:	
Child Prote	ction Service: <u>Bartholomew</u>		-
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Chin Avers Phone 8126895000			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.